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W H EILBERG, ESQ.

PAGE 02

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to:

Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
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02746 7590 11/18/2004
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

William H. Eilberg	(Depositor's name)
<i>William H. Eilberg</i>	(Signature)
February 1, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/940,849	08/29/2001	Jeffrey A. Trogolo	281-37	5109

TITLE OF INVENTION: BI-LAMINAR, HYALURONAN COATINGS WITH SILVER- BASED ANTI-MICROBIAL PROPERTIES

APPN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685	\$300	\$985	02/18/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
AZPURU, CARLOS A	1615	424-423000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. <u>William H. Eilberg</u>
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2. _____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.		3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Biocoat Incorporated
 AgION Technologies, LLC

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Fort Washington, Pennsylvania
 Wakefield, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

4b. Payment of Fee(s):

- A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature William H. Eilberg

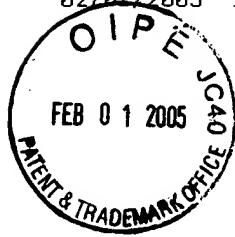
Date February 1, 2005

Typed or printed name William H. Eilberg

Registration No. 28,009

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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February 1, 2005

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Office of Publications
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P.O. Box 1450
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Re: U.S. Patent Application
Serial No. 09/940,849; filed August 29, 2001
Title: BI-LAMINAR, HYALURONAN COATINGS
WITH SILVER-BASED ANTI-MICROBIAL PROPERTIES
File No. 281-37

Dear Sirs:

I am transmitting an Issue Fee Transmittal (Form PTOL-85) and a Credit Card Payment Form (Form PTO-2038), for payment of the issue fee and publication fee for the above application. Small entity status is claimed.

This transmission contains three pages, including this cover letter.

Please confirm receipt of this transmission, by sending a fax to me at 215-885-4603.

I hereby certify that this letter, and an Issue Fee Transmittal (Form PTOL-85) and Credit Card Payment Form (Form PTO-2038), in the above-identified application, are being transmitted by facsimile to the United States Patent and Trademark Office, to fax number 703-746-4000, on the date shown above.

William H. Eilberg
William H. Eilberg
Registration No. 28,009
Attorney for Applicants

VIA FAX to 703-746-4000

WHE/st